

OFFICE USE ONLY
 Log No. **80793**
 Permit No. **212**
 Basin **212**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **20332**

1. OWNER Contri Court ADDRESS AT WELL LOCATION On Colo. going
 MAILING ADDRESS L.G. NV W. 22 Arlington to Frank

2. LOCATION 1/4 Sec. 4+5 T. 1 N. S. R. 602 E. Clark County Clark
 PERMIT NO. 161-05-50-074 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other

4. PROPOSED USE dewater WELL TYPE
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Dirty sands		0	3	3
Silty sands		3	13	10
Silty clay		13	18	5
Silty sand		18	25	7
Silty clay		25	35	10

and wells on this parcel
Arlington to Frank on Colo.

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet

HOLE DIAMETER (BIT SIZE)
 From 24 Inches To 35 Feet
 Inches Feet Feet Feet
 Inches Feet Feet Feet
 Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>	<u>PVC</u>	<u>5/16</u>	<u>0</u>	<u>35</u>

Perforations:
 Type perforation Slot
 Size perforation 0.30

From 10 feet to 35 feet
 From 10 feet to 35 feet
 From 10 feet to 35 feet
 From 10 feet to 35 feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 0 feet to 35 feet

9. WATER LEVEL
 Static water level 10 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name GAC

Contractor
 Address 536 E Maitland
Ontario CA
 Nevada contractor's license number 31246
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 11968
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 8-14-0

Date started 7-8-19
 Date completed 7-8-21

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)